

DEPARTMENT OF FINANCIAL INSTITUTIONS

WILLIAM S. HARAF, Commissioner of Financial Institutions
www.dfi.ca.gov



COMPLAINT REGARDING UNLICENSED TRANSMITTER OF MONEY ABROAD

Information Regarding Unlicensed Transmitter of Money Abroad

Your Personal Information

Name and Office Address

Your Name and Address

Telephone_____

Your Email Address_____

Contact Person_____

Your Telephone_____

Your Fax Number_____

Your Employer_____

How and when did you become aware of this transmitter of money abroad? Describe everything you personally observed about the conduct of its money transmission business. Submit copies of the following documents with this form: receipts, advertisements, photographs of transmitter of money abroad's offices and brochures that show the person or company complained of is engaged in the business of transmitting money abroad.

Are you willing to appear in court to testify to the foregoing? Yes_____ No_____

Your Signature_____ Date_____

Please complete and mail this form and related documents to the address below.

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